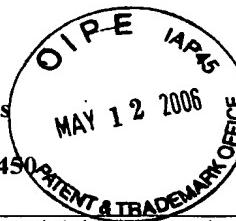


PART B - FEE(S) TRANSMITTAL

Complete and mail this form, together with applicable fee(s) to: **Mail** **Mail Stop ISSUE FEE**
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Fax **(703) 746-4000**



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22204 7590 03/23/2006

NIXON PEABODY LLP
401 9TH STREET, N.W.
SUITE 900
WASHINGTON, D.C. 20004-2128

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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/649,841	08/28/2000	Michael Charles Raley	111325-2	7876

TITLE OF INVENTION: DOCUMENT DISTRIBUTION MANAGEMENT METHOD AND APPARATUS USING A STANDARD RENDERING ENGINE AND A METHOD AND APPARATUS FOR CONTROLLING A STANDARD RENDERING ENGINE

APPLN. TYPE.	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	06/23/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
NOBAHAR, ABDULHAKIM	2132	726-026000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363) <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 MARC S. KAUFMAN 2 CARLOS R. VILLAMAR 3 NIXON PEABODY LLP
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Contentguard Holdings, Inc.

(B) RESIDENCE: (CITY & STATE OR COUNTRY)

Wilmington, Delaware

Please check the appropriate assignee category or categories (will not be printed on the patent) individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee

A check in the amount of the fee(s) is enclosed.

Publication Fee

Payment by credit card. Form PTO-2038 is attached.

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(Authorized Signature)

Marc S. Kaufman, Reg. No. 35,212

5/12/06 (Date)

05/15/2006 MBYEYENE2 00000043 192380 09649841

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01 FC:1501 1400.00 DA

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